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ABSTRACT

The Parent Participatich Task Force appointed in December 1967 by the administrators of the Office of Education, Public Health Services, and the Social and Rehabilitation Service to study parent participation and suggest policy recommendations, has recommended that the Department cf Health, Education, and Welfare spcnscr and prcmote increased participation of parents in all programs that serve children and youth and/or the parents themselves, and which receive Federal aid from this Department. Such participation includes membership of parents on advisory committees, opportunities for parents to serve as volunteers and employees, and a family-centered focus and maximum ccordination of services in health, education, and welfare programs designed to serve children and ycuth. Particular emphasis should be placed cn prcgrams for poor families and those of minority-group status. It is necessary to develop programs that strengthen the family unit, which is under many diverse stresses and pressures, including the competition of government agencies in prcviding services which it rcrmerly provided exclusively. Concommitant with the new approaches required tc give all families a significant and secure place in the community, evaluation ccmponents should be built into programs. (Author/JM)

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PARENTS AS PARTNERS

IN DEPARTMENT PROGRAMS FOR

CHILDREN AND YOUTH

A Report to the Secretary of
the Department of Health,
Education, and Welfare
by the
Task Force on Parent Participation

August 1968

Reprinted, March 1970

U.S. Department of Health, Education and Welfare

Robert H. Finch
Secretary

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D.C. 20201

OFFICE OF THE SECRETARY

Letter of Transmittal to the Office of the Secretary
from the Parent Participation Task Force

To : Mr. Alvin L. Schorr, Deputy Assistant Secretary,
Community and Field Services

From: Dr. Catherine Chilman, Chairman
Parent Participation Task Force

We have the pleasure of submitting, herewith, the report of the Parent Participation Task Force, as you requested of us in December 1967. The members of this Task Force were appointed by the Administrators of their respective agencies, the Office of Education, Public Health Services, and the Social and Rehabilitation Service. My part-time services were loaned to your Office, at your request, by Miss Mary Switzer, Administrator of the Social Rehabilitation Service. As a group, the members of this Task Force represent a wide variety of professional specialties: education, pediatrics, psychiatry, psychology, social work, public health administration, community organization, and research.

Our first task was to review the earlier report prepared by your Office regarding present Department activities in relation to services to parents. The Task Force found this report to be a generally accurate summary. It reflected a great variety of programs related to parents in the fields of health, education and welfare. The major underlying themes of most of these programs indicate that the majority are child-centered, rather than family-centered, that services are generally developed for parents (rather than with parents), that publications addressed to parents, as parents, are generally rare (except, for example, in reference to those from the Children's Bureau), and that most of these publications are addressed to parents who might be termed either middle-class or stable working class. Involvement of parents, especially poor parents, in advisory and planning capacities or as sub-professional employees was found to be lacking in most of the programs which receive Department support. Moreover, many of the programs which include services to parents are specific to certain selected problems, such as physical handicaps or economic dependency.

At your request, the Task Force then addressed itself to the broad, general subject of parent participation and the policy recommendations that we would want to make to the Secretary. It was recognized early in our meetings that the more traditional ways of helping parents through parent education and parent counseling have had very little success in reaching large numbers of parents (especially low-income parents) and, moreover, that such approaches had very little measurable impact. It seemed amply evident that other, more basic strategies, were called for. It was also established, at an early point, that parents functioned in two major roles: their public function in reference to community programs for all children and youth and their private function in reference to their own families. Therefore, our thoughts were addressed to both roles.

The Task Force also agreed to address itself mainly to parents in their functions as mothers and fathers, rather than in reference to their many other functions in the home and community. While these functions are important, consideration of all adult roles would lead this group into too many fields. For somewhat the same reason, we decided to limit our report to parents in general, rather than to parents with special needs such as those related to handicapping conditions, deviant behavior and the like.

Within this more general focus, we decided to emphasize the needs and problems of low-income and/or minority group parents and their children. Emphasis was placed on these groups because there is overwhelming evidence that their problems and needs are particularly acute and that they have suffered from multiple factors that exclude them from full participation as citizens with equal rights in a democratic society. We believe that this exclusion has been a primary cause of their disproportionately high rate of poor physical and mental health, unemployment, family breakdown, low educational achievement, and deviant behavior. We believe that it is necessary and right that disadvantaged parents and youth play an active and equal part in determining and implementing the advantages that they must have if they are to become competent members of a society which must offer participative opportunities to all its citizens if it is to survive as a democracy.

These convictions are based on a commitment to democratic and humane principles. They also are supported by basic research in the social and behavioral sciences as to the factors that relate to sound human development, effective parental behavior, social and mental health, and the capacity of human beings to adapt positively to changing

conditions. There is almost no research available as to the best ways in which programs can actually be implemented to promote more effective participation by poor people as advisors, policy-makers, and employees in human service fields. These are very recent program developments. While such specific evidence is lacking, the Task Force decided that the rapid changes and critical problems of our society demanded creative responses, based on the best, albeit incomplete knowledge, that is currently available. Research-based knowledge must be developed concurrently as experimental programs are carried out.

The Task Force sought help from many sources of knowledge. Members visited selected inner-city programs in various parts of the country and conferred directly with low-income and minority group parents who were involved as participants in action projects. Local staff people who were administering such projects were consulted as well as Federal personnel including staff members of the Office of Economic Opportunity. Reports from this, and other, Departments were studied as well as relevant reports to Congressional Committees. A thorough search was made of the professional literature, particularly in reference to projects directed to helping low-income families and to those concerned with employment of poor people, their envolvement as volunteers and as advisors and policy-makers, and the organization of neighborhood service centers. The Task Force also built on the expertise of its members, each of whom had specialized knowledge and experience related to parents and children, in general, and low-income parents and children, in particular. Although each of the Task Force members represented a particular professional field in health or education or welfare, there was unanimous agreement that these fields needed to be restructured so that they might be more closely coordinated, allow for more participation by parents, be more family-centered, and more effective in preventing as well as alleviating problems associated with poverty and prejudices.

We recognize that the recommendations made here are extremely difficult to carry out. We have identified some of the problems of organization and administration that we know are not readily solved. We do not have many of the answers, but hope that these answers will develop from many parts of the country as knowledge accumulates through experimentation and study. We are aware that implementing these recommendations will require courage, imagination, flexibility, and hard work. We believe that different communities will need to find their own ways of bringing parents of many diverse backgrounds into a more complete partnership with health, education and welfare services. We think that endeavors of this sort are one part of trying to effectively meet the challenge of the times in which we live.

As Chairman of this Task Force, I would like to thank all the members for their help. Their quality as people who are dedicated to human service through Government makes one particularly gratified to be a staff member of this Department.

The other members are:

Miss Gertrude Hoffman
Mr. Albert Lauderbaugh
Dr. E. James Lieberman
Mr. Richard B. Rogers
Dr. Delmar Ruthig
Dr. Carl Shultz
Dr. Charles Smith
Mrs. Elinor Wolf

TABLE OF CONTENTS

	Page
Introduction	1
Parents on Advisory Committees and Boards	9
Advisory Committees	9
Boards	15
Parents as Employees and Volunteers	23
Restructuring of Occupations and Job Development	26
Employee Selection and Recruitment	28
In-service Training and Supervision	31
In-service Education	38
Evaluation	39
Use of Volunteers	40
Administration	41
Services for Parents	43
Neighborhood Services Centers	46
Basic Service Principles	49
Family Life and Sex Education	50
Family Pre-crisis Centers	52
Consumer Information	53
Recommended Pilot Projects and Research	54
Development of Trained Personnel for Supervision and Administration	58

INTRODUCTION

It is recommended that the Department of Health, Education, and Welfare sponsor and promote increased participation of fathers and mothers in all programs that serve children and youth and/or the parents themselves, and which receive Federal aid from this Department. Such participation includes (a) membership of parents on advisory committees, (b) opportunities for parents to serve as volunteers and employees, (c) a family-centered focus and maximum coordination of services in health, education, and welfare programs designed to serve children and youth.

This recommendation applies to parents in all sectors of society but particular emphasis should be placed on programs for poor families and those of minority group status.

The Basic Rationale for these Recommendations is:

Families are under many stresses in today's society. These stresses include: the complexity of modern life, the deep gulf between the poor and the rest of society, the huge numbers of people living in great urban centers, the rural isolation of some of the most disadvantaged poor, the depersonalizing factors of our technological culture, the velocity of social change, the economy's requirement for a very high level of intellectual development and physical and emotional stamina, and demands for an effective earning capacity and consumer know-how. An upheaval in value systems and ethics accompanies these changes. Our society offers increased, but unevenly available,

381-260 O - 70 - 2

opportunities for individual fulfillment and also increased temptations and pressures for deviant behavior. These forces, along with the multiplicity of non-coordinated services that have been set up to serve families and family members, tend to fragment the family with their competing pressures and demands. This is particularly true for low-income people. Services are also seriously inadequate in many parts of the country to serve the poverty families who need them most.

A number of problems arise from the nature of today's society and from the services it offers. They tend to reduce the capacity of parents to act responsibly for their children. They tend to detract from parental commitment to the goals of service agencies and bring about a sense of defeat, irrelevance and alienation on the part of parents in reference to the community. Moreover, since families are a complex interacting unit, the solution of the problems of one member frequently serves to create problems for other members. The problems of all family members require coordinated attention. Although these stresses occur at all socio-economic levels, they are particularly severe for poor people, especially for those belonging to minority groups.

Much of current society is dehumanizing to the individual: his sense of personal significance and power is severely threatened. The family is potentially a core unit for the development of a sense of

individual identity, trust, belongingness, permanence, self-fulfillment and development as a person. Yet society and many of its services tend to dismember the family with their competing pressures. These pressures threaten an increasing separation between parents and children. The parental sense of self-esteem and competence is frequently undermined.

Health, education, and welfare services tend to place heavy, and sometimes competing, responsibilities on the family. Schools, medical facilities, vocational training programs, recreational activities, welfare services: all require parental cooperation in relation to the various children in the family. Some of these programs seek to substitute for parents, whereas they should more appropriately supplement the parental function. In many parts of the country these services are incomplete and inadequate. Coordinated and improved services are needed which complement family functions and which are carried out in partnership with parents -- both fathers and mothers. Emphasis must be placed, moreover, on the easy availability and quick, courteous delivery of such services.

Many of these services are child-centered and tend to focus on one child in the family as in the case of programs related to mental retardation, mental illness, the handicapped child, the infant or very young child, the delinquent, the "slow learner," and the like. There is a tendency to overlook the dynamics of family life and to overlook the complex of all children in the

family, the composition of the family, and the relationships between parents, as well as between parents and children. There is also a tendency to address services only to the mother and only in terms of her function as a parent rather than her multiple functions as a whole person. Moreover, many programs are planned and administered in terms of what professionals think is best for the child rather than taking into consideration the needs and goals of his parents.

Department programs for children and youth seek to help young people achieve their maximum potential in relation to their physical, emotional, intellectual, social, and economic functioning. Parents are central to these goals as partners in their implementation. These are also parental goals, though parents may differ, as individuals, as to how they think such goals may be achieved. Parents need to have an active role in planning and carrying out services for children and young people rather than being relegated to passive, peripheral positions.

It is necessary to develop programs that strengthen families and which give all families a significant and secure place in the community. New approaches are needed in order to adapt health, education, and welfare programs to the needs and situations of a wide variety of families in a wide variety of neighborhoods and to enhance the economic stability, health, knowledge, and skills of parents as well as children and youth.

The recommendations that follow frequently go beyond knowledge for which there is a sound research base or professional content or tradition, but social change is proceeding with such velocity that we must anticipate and meet it in the best ways that we can devise. Events are moving too swiftly to design program research and assess the results before action is taken. Research is available which indicates that more traditional ways of working with parents, such as in counseling and parent education, have little measurable impact and reach very few people. This is especially true in reference to disadvantaged people and members of minority groups; therefore, it is imperative to experiment with other approaches along with the more usual ones.

Concomitant with these new approaches, evaluation components should be built into programs. These components should include the reactions and opinions of parents as well as of professional staff members. Experimental demonstration and formal research projects are also called for.

It is important to recognize that children and parents are unable to benefit from health, education, and counseling services when family incomes fall below a minimum standard of living that provides for enough money for food, clothing, shelter, and transportation. The first concern, therefore, is that public assistance standards be revised, both as to amount of money available to families and eligibility for

public assistance, especially in States where assistance levels are seriously below budgeted family need, where poor families are denied aid, and where families are ineligible because an able-bodied man is present in the home.

The second major concern is development of employment opportunities for fathers and mothers so that improved income will be available to the family. Programs serving children and youth should provide such opportunities to the maximum possible extent.

In reference to professional knowledge and tradition as to program staffing and operation, it is the conclusion of this Task Force that the essence of a profession is service to others with the best skill and knowledge available. In the rapid currents of the moment, knowledge must be developed from observation and consideration of these observations; new skills must be fashioned out of old ones and out of new experiences. Much of the new accretions of relevant knowledge and skill lie in the ongoing experiences of staff members in health, education, and welfare all over the country; relatively little has yet found its way into publications. Therefore, it will be necessary to consult with colleagues, including those in OEO programs, who have both failures and successes in a variety of parent participation projects.

This is not to infer that the more traditional professional practices in working with parents and with children and youth programs are to be abandoned. There are large areas of professional expertise, legislative requirements and financial resources that must provide the framework for programs. One of the needed processes is open and frank discussion between professionals and citizen groups as to why programs are the way they are, to what extent they can and should be changed, and what constitute the stumbling blocks to needed change. A basic principle is that of working in full partnership with parents, rather than independently devising for parents and their children.

Implementation of Recommendations

Among the Department programs affected by these recommendations are the following:

Office of Education

All those service programs (as contrasted to basic research, for instance) which have to do with elementary and secondary education and those in adult education having to do with family life, etc.

Public Health Service

Programs in health service, including health education, that are concerned with providing services to children and youth or are immediately related to children and youth (such as family planning).

Social and Rehabilitation Service

Social services to families, child welfare services, rehabilitation services for children and youth, maternal and child health services, administration of Title XIX, determination of eligibility for public assistance, especially AFDC.

The basic principles for the implementation of these recommendations are presented below, but it will be necessary for the various administrators to work out details in relation to the various programs. Especially complex areas of parent participation will be found in relation to the establishment and operation of committees and boards because there are such a wide variety of community organization patterns and related legislation at the various levels of Government.

PARENTS ON ADVISORY COMMITTEES AND BOARDS

It is important that parents be empowered to play a stronger part in advisory, policy, and decision-making roles in reference to health, welfare, and education programs that affect their children and themselves. This principle particularly applies to poor parents and those of minority group status. It also applies to programs at neighborhood, city, county, State, regional, and national levels.

It will be necessary to make deliberate plans to provide for this stronger role of broad parental participation. These plans cannot be spelled out in detail here because communities are greatly diversified in terms of their histories, traditions, experiences, situations, governmental systems, legal provisions and the like. Therefore, basic principles are presented, with the recognition that different communities will need to make different adaptations to the principles.

Advisory Committees

At a minimum, education, health, and welfare agencies receiving aid from this Department should set up advisory committees associated with the various relevant public services: such as public welfare agencies, schools, and clinics. Such committees should function at neighborhood or "catchment area" (areas served by programs such as a school, clinic, or welfare agency), city and/or county, State, and Federal levels. Particular emphasis should be placed on the establishment of such committees in

381-260 O - 70 - 3

poverty and minority group areas. Local committees should be democratically selected (or if possible, elected) and representatives from these local committees should be elected to serve as delegates to committees at the higher levels of Government, including the Federal. At least 50 percent of the membership should be of parents (both fathers and mothers) that the program serves and should be proportionally representative of minority groups in the neighborhood or catchment area. The other 50 percent of the membership should be made up of other citizens with a special interest and expertise in the program, including professional persons.

The functions of advisory committees are different from those of boards in that advisory committees are generally empowered only to make recommendations while boards have decision-making functions. Recommendations by advisory committees are not necessarily binding. However, an advisory committee which finds itself without power is likely either to disband or become much more vocal and aggressive in its demands.

In order to strengthen advisory committees and yet provide them with necessary structure, it is recommended that:

(a) A staff person be assigned as a consultant and liaison person between the committee and the administrator. This staff person should have a genuine interest in an assignment of this kind, have skills in working with a group, and be sensitive to the importance of increased representation of poor people at advisory

levels. This staff person should be a consultant, not a chairman. It is recognized that many parents who are members of these committees may lack skill and experience in activities of this sort. They need to learn committee membership skills through experience and help from a competent, sympathetic committee consultant. One of the outcomes of advisory committee experience might well be gains in the leadership skills of members so that they might be increasingly competent in other leadership functions, including membership on boards.

An alternate to assignment of staff members as committee consultants might well be providing expense funds to such committees which would make it possible for these groups to select and employ their own leadership training personnel. The advantage to this approach is that it avoids the implication that advisory committees are overly influenced or controlled by agency staff members.

(b) Advisory committees to neighborhood agencies should be linked to such committees at city, county, State, regional, and national levels of Government. Advisory committees at these higher governmental levels should be made up of members elected from the more local units.

(c) Advisory committees should have the power to ask for and receive full, fair hearings from administrators, boards, and relevant

governing bodies (such as for example, the City Council) and, as needed, from advisory committees and administrators at higher levels of Government.

(d) One of the functions of advisory committees might well be that of hearing suggestions and grievances of persons whom the program serves. These persons should be accorded full hearings with the guarantee that their requests will be acted upon by the committee if possible or transmitted to the agency administrators.

(e) Advisory committees also should have the power to advise and make recommendations in such areas as: agency policies and practices, agency personnel, agency programs, physical structure and site of agency. Recommendations to be considered should have the endorsement of the majority of the committee. Appropriate administrative personnel should meet with committees, upon their request, and seriously consider recommendations. Needed information should be furnished and earnest attempts should be made to meet recommendations to the maximum possible extent. When this is not possible, the reasons should be given, such as budgetary and legal restrictions. Information should also be given as to how the problem might best be solved. For example, it may be impossible to meet requests for higher public assistance payments because the local and/or State Government has adopted assistance ceilings or has failed to

appropriate the needed funds. Such a problem should be explained, along with suggestions as to where and how requests for change might be made.

It might be wise to accept some committee recommendations on a trial, experimental basis with the proviso that the committee, the agency staff and the administrators will evaluate their results after a specified experimental period, as to the costs, feasibility and efficacy of the experimental changes.

(f) Members of advisory committees and staffs have a responsibility to take the initiative to reach out to the community to inform members about programs and about the rights of individuals to be served.

Community aides, employed by the agency, might have this as one of their functions. For example, community aides, who come from low-income neighborhoods, themselves, have been found to be helpful in explaining programs through direct, verbal communication with poor people in their own homes or in such service centers as clinics, schools, welfare agencies and the like.

The activities of such committees should be publicized and made widely available. The committee should also promote and advise on publications and other communications activities (including radio and television) of the program of the agency so that information will

be readily available in a way that is understandable for parents and other interested citizens. This might include the use of mimeographed news letters prepared at least in part by advisory committee members and other agency aides. Funds should be made available to the committee by the agency for operating expenses, including costs of public relations.

There is a serious communication problem between community agencies and disadvantaged parents who often have very limited reading ability. Simple, concise statements at about the fourth grade reading level are needed to explain health, education, and welfare programs of local agencies. Film-strips and posters are recommended as well as short pamphlets. These materials should avoid middle-class assumptions, such as that all children have fathers in the home and that all mothers are, or have been, married. Moreover, these materials should be readily available -- as in schools, clinics, and welfare offices -- and should be reviewed by advisory committees before they are distributed. Inter-agency distribution is also called for so that, for example, information about health services can be obtained in schools and welfare agencies.

(g) The committee, including the administrator, should hear grievances of persons whom the program serves. A full fair hearing

must be accorded along with serious attempts to meet grievances within the legislative, contractual and budget possibilities of the program.

Legal counsel should be made available, upon request and free of charge, to represent low-income people at hearings of this kind.

Boards

It is highly desirable that provision be made for a broader citizen representation on Boards of Health, Education, and Welfare agencies. Not all localities and States have citizen boards of this kind; it is recommended that they be set up in those places where none exist. Whether the board is newly constituted or of long standing, it is recommended that its membership include a significant proportion (at least one-third) of people who are drawn from poverty and minority group populations.

Where communities and States already have citizen's boards, as in the case of Boards of Education or Health or Welfare, effort should be made to assure representation of low income and minority groups on such boards. Advisory committee groups at city, county, State, and Federal levels of Government should have ready access to such boards, including the right to present their viewpoints and request action on them and the right to information as to the deliberations and the actions of these boards. Since there are many varying forms of board structures at local and State levels of Government, it will be necessary to implement the above principles in a variety of ways.

Boards generally have the power to advise and approve or disapprove of the policies and major operating decisions of an agency. They also generally have similar powers in reference to the selection and retention of agency heads. These powers go far beyond those of advisory committees but operate within the framework of legal provisions, especially in the case of public agencies. This includes provisions as to the requisite qualifications of the program administrator -- such as a school principal or clinic director.

While a board has broad policy-making powers, administrators generally have the right to hire staff, administer the program and make administrative decisions within policy guidelines developed in consultation with the board. Such administrative powers are deemed to be essential for the smooth operation of an agency.

In those communities in which legal restrictions prevent meaningful citizen participation on boards, it is recommended that consideration be given to revision of pertinent laws.

As in the case of advisory committees, it is recommended that local boards elect members to State, regional and national boards.

Details of the above recommendations regarding advisory committees and boards would need to be worked out differently by the various agencies receiving aid from this Department. It is urged that local and State agencies consider the following issues and make appropriate plans:

(1) How might these recommendations be implemented in the various States with their differing sets of legislation and special issues to consider? These issues include the wide variety of State and local structures in the fields of health, education, and welfare and already existing citizen boards and advisory committees.

(2) Arrangement for democratic election of advisory committee or board members at the local levels poses a challenging problem. It is clear that selection of members by an administrator would be inappropriate.

Communities will need to experiment with different ways of selection of boards and advisory committees. This will depend on many factors, including the size of the community and its agencies, and the organizations already existing in communities.

In general, each community will need to consider its present state of organization in reference to education, health, and welfare services. Where community action agencies, such as those sponsored by OEO, already exist, it would seem best to build on structures of this sort. Advice should be sought from citizens and staff personnel who have participated in these programs.

In the selection (or election) of committee and board members, it is recommended that agencies consult with organizations which represent the consensus of minority groups and poor people, such as

381-260 O - 70 - 4

neighborhood churches, civil rights groups, welfare rights organizations, and so on. Each organization might be invited to recommend people who can reflect broad community concerns and those peculiar to the agency in question. Professional staff, such as teachers, public assistance workers, public health nurses who are in direct contact with poor people might well take the leadership in giving information to them about proposed advisory committees and boards and stimulating participation in neighborhood election procedures. Community outreach workers might also serve in this capacity. These procedures should be worked out by administrators and staff members of the agencies in consultation with neighborhood organizations.

In larger communities, where there are a number of schools, clinics, welfare offices each neighborhood facility should have its own advisory committee. In smaller communities, a committee serving the whole agency (such as the Department of Health) should suffice.

(3) Advisory Committees and boards at city-wide levels will be necessary in larger communities. They should be made up of members elected from neighborhood facilities. State, regional, Federal advisory committees and boards should be made up of members elected

from local communities (in the case of States), from the States (in the case of regions) and from the regions (in the case of groups meeting at the national level).

(4) Advisory committees and boards should not be self-perpetuating groups. Members should be retired after a three-year term of office, with new members being elected. A rotating system of membership (with one-third of the committee retiring each year) is recommended.

(5) Payment of expenses of advisory group and board members will be necessary. These expenses might best be met by paying a flat per diem, a consultant's fee, plus costs of transportation for out-of-town meetings. This approach to payment is recommended rather than that of varying amounts given to different individuals dependent on submitting expense accounts for such items as child care, meals, etc. A consultant's fee is recommended for all board and committee members as this constitutes recognition of the contributions of each member and the fact that many of the members have an immediate need to earn money. The Task Force believes that free volunteer service which requires a significant input of time and energy is generally a luxury that only the affluent can afford.

(6) It will be necessary to provide staff training for administrators who have not previously worked with broadly representative boards and parent advisory groups of these kinds.

Especially in larger communities and agencies, specific staff members might well be assigned to work with such boards and parent advisory committees. Interest in this assignment, as well as past experience and capabilities, are to be taken into account.

This staff training should include the following components:

(a) It should be conducted in an informal manner with plenty of opportunity for discussion and raising of objections and questions. Through free give-and-take administrators will have an opportunity to learn from direct experience the value of flexible democratic procedures.

(b) An experimental approach is to be encouraged, with recognition that, for many agencies, the use of boards and lay advisory committees with representatives from the most disadvantaged sectors of society is new. It is to be borne in mind, also, that this is a new experience for such committees; a great deal of experimentation and learning is needed on both sides.

(c) As indicated, factual information is to be made available as to the legislative and fiscal restrictions on programs as well as resources (public and private) that might be used to expand services.

(d) Training consultants are recommended, especially persons who have had successful experiences in working with committees of this kind.

(e) It may be relevant to provide information regarding cultural patterns more often found among the long-time unemployed or under-employed poor than among more advantaged people. Among the relevant patterns that may well be encountered are: anti-intellectualism and anti-scientism, personalism (judging the merits of a program largely in terms of the personal attributes of its staff and director and/or in terms of how it affects specific individuals), lack of long-range goal commitment, distrust of middle-class persons and institutions (including health, education, and welfare personnel and agencies), authoritarianism, pragmatism, orientation to the present, fatalism, lack of flexibility, lack of skill in inter-personal relations, punitiveness, concrete (rather than abstract) thinking.* Many but not all poor people

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*Two of the Department's publications which examine the life-styles of the very poor in some detail are Growing Up Poor and Low-Income Life-Styles. Both are available from the Division of Intramural Research, Office of Research, Demonstrations and Training, Social and Rehabilitation Service (single copies). Bulk orders are to be placed through the Government Printing Office. Costs: Growing Up Poor (by Catherine Chilman) 45¢; Low-Income Life-Styles (by Lola Irelan et al) 35¢.

> hold values such as these; they are an outgrowth of the extreme deprivations fostered by poverty, prejudice, and the rejecting attitudes of other social groups.

Low-income life-styles are most likely to be moderated if poor people experience success in meeting specific and pressing needs and if they are treated with dignity, respect, and justice.

PARENTS AS EMPLOYEES AND VOLUNTEERS IN PROGRAMS FOR CHILDREN AND YOUTH

All programs which receive federal aid from this Department and which are planned to serve children and youth, should, to the maximum feasible extent, provide for the employment of parents and young people and for their service as volunteers. Priority employment and volunteer preference should be given to parents and young people in the neighborhood or catchment areas of the federally aided programs: such as schools, clinics, welfare offices and the like. Priorities in the implementation of these recommendations should be given to programs in poverty areas. Insofar as possible the non-professional staff should consist of persons who have been recruited from the low income, unemployed or underemployed sector of the population. Care should be taken to afford employment and volunteer opportunities to all ethnic groups, and these opportunities should be generally in proportion to the representation of these groups in the neighborhood or catchment area of the agency. Care should also be taken to recruit males as well as females for employment.

Although it is highly desirable that employment in these programs be made primarily available to those who are in serious need of work, it should be borne in mind that the chief purpose of these programs is to provide a high quality of services to children, youth and parents. Employment and volunteer policies ought in no way to endanger this major purpose. Moreover, employment and volunteer opportunities should not be limited only to the unemployed or underemployed poor. These opportunities might well be made available, also, to other underemployed persons whose interests and abilities are particularly

adapted to employment or volunteer service, work-training, and further education in the human services fields.

A person who is employed in a human service agency should not simultaneously be a member of its advisory committee or board.

Basic Rationale for these Recommendations:

There is a seriously limited supply of trained and professional personnel in the human service occupations. This employment area is the fastest growing occupational field today. There are severe personnel shortages in the field of health, education, and welfare. It is unlikely that these shortages will be substantially reduced in the future if we continue to insist on high levels of education and training for all components of the jobs in these fields. Conversely there is a large group of underemployed and unemployed persons in this country and it is probable that a significant number of these people might be employed and trained to perform necessary functions in these occupational fields. Such employment has further possible advantages: (a) neighborhood people are most apt to understand their own neighborhoods and can contribute to the vitality and relevance of a local service agency and (b) through the employment of parents and young people in public programs there is a greater likelihood that they will acquire important new learnings and identification with the goals of these programs.

There are a number of people, at all socio-economic levels, who have a desire to serve as volunteers in health, education, and welfare programs. The potential of the contribution of volunteers has been generally underrecognized and developed in most communities.

Rigid educational and training requirements have developed, over the years, regarding volunteer service, employment and advancement in health, education, and welfare occupations. To a large extent, there is a lack of evidence that such educational and training requirements are necessary for a number of the job components in the human service fields. Some functions in the human services require a very high level of professional expertise, but other functions can be made available to persons at a number of levels of education and training, especially if professional supervision and continuing education are provided. It is imperative, therefore, to re-analyze health, education, and welfare occupations and separate them into component parts in relation to levels and nature of education and skill required for adequate performance. Moreover, in light of current social and legislative changes and in the light of the development of new knowledge, these fields need to expand their occupational scope and diversity. Many particularly need to extend their outreach function and communication with the community.

Expansion of human services in health, education, and welfare are needed on the nieghborhood level as a strategy in coping with the de-personalizing and polarizing forces in today's mass society. Involvement of neighborhood residents as employees and volunteers in these services should increase their relevance and outreach and should mitigate inimical factors of this sort.

The involvement of parents and young people as employees or volunteers in programs serving children and youth is likely to increase their knowledge, skills and sense of participation in programs designed to strengthen their own and other families.

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The Following Guidelines are Suggested for Implementing these Recommendations

The development of new careers and the restructuring of old ones should be emphasized. These careers should range from trainee positions to fully professional ones. The concept of progressive development of the individual is central. It should be recognized, further, that, in some neighborhoods, professionals are available but are not currently employed. These persons include mothers of young children and retired people. Flexible, imaginative planning is called for to provide opportunities for such persons both for employment and for services as volunteers. Part-time, as well as full-time, positions should be developed.

The principle of the career ladder is crucial and calls for a structuring of job levels so that an employee may move both vertically and horizontally within public programs; that is, an employee should be able to move upward to increasingly responsible levels of work and increasingly high rates of pay. He also should be able to move from one field of work to another, such as from a health program to an education or social service program.

The Generic Nature of the Human Services Occupations

There are common components in the health, education, and welfare fields, such as an understanding of human behavior and community resources. Generic education and training for these fields ought to provide the base for occupational movement into various sectors of the human service family of occupations. For example, it should not be necessary to set up separate training programs for case aides or community outreach workers in the fields of health, welfare,

and education. General training programs are more appropriate and less expensive. Specific training, related to specific job techniques, can be added in specific occupational settings.

Job Development

It is essential that specific jobs be planned before employees are recruited and trained. The staff, advisory committee and administrator of a service (school, clinic, social agency, neighborhood center) might well plan together as to what kinds of work might be done that does not necessarily require professional expertise and which is currently either not being done or is proving to be more than the staff can readily handle.

In the field of both physical and mental health, three major categories have been identified for non-professional:

a. communication, advisory, and facilitative functions (including "case manager")

b. application of specifically defined technical jobs such as emergency room assistant or urologist assistant, and

c. persons trained for a combination of technical and advisory functions, such as a pediatric or mental health assistant.

These occupations may be carried out in a variety of settings including the home, the community, the school, the clinic, a hospital, and an institution.

In the field of education, such jobs as teacher's aide, library aide, media aide, recreation aide, school day care, tutoring, and link between home, school and other agencies have been identified.

In the social welfare field such jobs as caseworker's aide, receptionist, child care aide, community outreach worker, "case manager", homemaker, family day-care worker, day-care center aide, neighborhood coordinator, and recreation worker have been suggested.

In the area of rehabilitation a number of functions may be carried out by aides in such fields as assistant counseling, outreach worker, service facilitator, occupational and physical therapy aides and so forth.

Clear, concise job descriptions should be prepared and shared with the staff and the advisory committee in advance of actually setting up the jobs. At the time of employment, they should be shared with the potential employee.

Difficulties are apt to develop when an agency quickly employs a group of neighborhood people without having first prepared the staff for this and without having developed specific job plans.

The Employee Selection Process requires the application of new understandings and methods. There is lack of evidence that requirements as to past educational achievements are associated with success or failure in many job situations. Therefore, educational requirements should be carefully re-examined and lowered for all jobs for which this is a good possibility. For instance, some jobs require only a minimum level of literacy, but may require such qualities as a good capacity to relate to people or a high potential for handling instruments or tools; the basic nature of the job should be assessed along with the particular interests and abilities of individuals.

Evaluation of actual work performance is often the most valid criterion of a person's employment potential. There is also a growing awareness that

many of the tests which have been used for occupational placement lack relevance and validity for the selection and placement of disadvantaged people. Moreover, there is lack of evidence that these tests are necessarily predictive of job success in sub-professional human service occupations. Oral tests and actual performance in samples of actual jobs are being recommended by job placement specialists. Further recommendations include use of short-term job placement opportunities and replacement if indicated. A rotation through a variety of work experiences helps both employee and supervisor to assess employment potential for various job functions. Experience also indicates the importance of quick job placement rather than long preliminary routines of counseling and testing. After the person has been employed and has had an adjustment period, it may be useful to provide training in the art of test taking so that he has a better chance to move on to other jobs in both the public and private sectors. Such training, however, may prove to be ineffective, for some people. Previous educational deficits, plus long-standing anxiety reactions to a testing situation, may provide continuing blocks to testing success. However, this often has no relation to actual job performance. Counseling and assessment as to an employee's work potential and occupational opportunities are also appropriate after he has been placed in a job. This should be a continuing process as part of a longer counseling program.

The Office of State Merit Systems of the Department has taken leadership in urging States to establish a series of sub-professional classes in the various federally aided programs. It has developed guidelines for appointment

of disadvantaged persons to public agency jobs, using new levels of selection and placement methods tailored to support positions in the human services occupational fields. (See the letter of March 31, 1968, to State Personnel Directors from the Director, Office of State Merit Systems, of this Department).

A number of disadvantaged people, especially males, are barred from jobs because of previous arrest records. Such records should be carefully assessed and not necessarily used to disqualify the person. Many low-income people have acquired such records at least in part because of prejudice on the part of law-enforcement personnel.

Recruitment of Personnel

Among the recruitment methods that have been used successfully are the following: recruitment from the clientele of the agency, upon the recommendation of staff members; recruitment from neighborhood organizations such as churches and clubs; recruitment through other social and health agencies that are in contact with the people in the neighborhood; recruitment through the public employment service. Some communities have found it useful to establish a central job center (see, also, p. 25 re suggestions for a volunteer center) so that the employment opportunities of all the human service agencies, both public and private, may be registered in one place. This plan is helpful to the agencies and to persons seeking employment. It is important that such persons have full information about new career possibilities so that they can more nearly match their interests and needs to the job.

Recruitment and employment should be based on the interests of the potential employee and the requirements of the work to be done, rather than on such factors as past education, experience, or a middle-class behavior style. For instance, spontaneity, warmth, and ease of relationship with other neighborhood people has been found to be associated with success in such jobs as case aide, teaching assistant, community worker, and case manager.

The "case manager" position is espoused by a number of program administrators. This position has also been entitled the "multi-purpose worker" and the "expediter." The main function of such a person is to help neighborhood people know about available community services in health, welfare, employment, education, legal aid, recreation, etc. and to aid them in getting these services.

In-Service Training

Provision for planned, well supervised in-service training is essential. Analysis of the results of a number of job placement and job training programs for disadvantaged people in the human services occupations provide the following conclusions based on observation and experience, (formal research and evaluation of such projects is largely non-existent):

a. Group supervision with ample opportunity for free discussion and participation is recommended rather than didactic methods of instruction or intensive individual supervision. Role-playing (such as practicing an interview) is often helpful. Group supervision has much to recommend it. It provides an opportunity for employees

to share experiences and to evolve, together, better ways of handling their work. It gives employees experiences in working together: a skill in which many may be deficient owing to the adverse conditions in which they have lived. It can provide an atmosphere in which friendships are made -- an important factor in job satisfaction. It is also less time-consuming and expensive than individual supervision. Another positive and important aspect of group supervision is that it provides the supervisor with an opportunity to learn from the trainees. These trainees are likely to have fresh and significant perceptions and insights about the program and people that it seeks to serve, which insights and perceptions may not be otherwise available to supervisors who are usually middle-class professionals. The group supervision process should be viewed as a learning opportunity for all concerned. Supervision should be a continuing process and also be individually available, as the need arises.

b. Orientation to the work of the agency plus participation in staff meetings builds greater understanding and a sense of real involvement if this orientation and participation is skillfully carried out. For example, such meetings need to be informal, loosely structured, and democratically led. Opportunity for open discussion by all participants is essential. Professionals need to be encouraged to listen and learn, as well as to impart information. Reports from some pro-

grams which employ neighborhood personnel indicate that it is useful to have some meetings for professionals, by themselves, and some for the non-professional employees in that meetings of this kind can more freely take up "delicate issues" such as grievances non-professionals have against professionals, and vice versa. Out of meetings of this sort specific plans can be made to deal with areas of difficulty.

c. Orientation to the project and special training in supervision is also needed for the professional staff. In such training, it is important to share with the staff the rationale of the program; the philosophy that it must provide an opportunity for the development of employee skills through work experience, training and education; that job content needs to be clearly and specifically defined; and that the employee will probably need considerable help in understanding and performing his job at first.

d. Professional staff members may be resentful and suspicious of bringing non-professionals into work that they have considered to be only a professional function. They will need an opportunity to air their resistances to this and be encouraged to adopt a flexible, experimental attitude. Their jobs will need some restructuring so that they will increasingly perform only that work which requires professional competence. Opportunities for further training and education of professionals should be provided so that they can upgrade their specialized skills and find new work opportunities as non-profes-

sionals take over tasks that they once performed. In fact, experience shows that professionals tend to take on higher level tasks as they are relieved of simpler functions and increasingly move into such roles as teacher, supervisor, specialist, and consultant.

e. In supervising trainees who lack prior training and specific education it is important to recognize differing life styles and situations of the employees and to work for clear communication with plenty of opportunity for "feedback." (See p.21 of this statement regarding cultural patterns of poverty.)

f. Quick success is important to the employee's sense of self-confidence. It must be recalled that many of these employees have met with a series of failures in the past and have been treated as inferior. An outer attitude of apathy or bravado may mask inner feelings of fear and distrust. Thus, many such persons need specific help to build a positive self-image and self-esteem. This help involves not only opportunities for success, but also expressions of praise and acceptance.

g. Confidentiality of privileged information is a central component in school, health, and social services. The importance of this must be clearly explained to neighborhood employees and staff members must demonstrate this principle by their behavior.

h. Personal and family problems are likely to arise which require counseling help and referral to needed services.

There are conflicting opinions as to whether or not supervision and work-counseling should include handling of personal and family problems. Some claim that this would constitute an invasion of privacy; others believe that these services are necessary and helpful.

At least one intensive psychological clinical study of the re-training of previously unemployed Negro men (and perhaps the only study of this kind) shows that they had severe family and personal problems which seriously hampered their education and training and which would have probably caused a large number of them to drop out of the program or be discharged. These men, who were being trained as practical nurses, showed high levels of anxiety about their own ability to succeed in the program, about their own masculinity, about racial prejudice, and about the basic goals of the program. They were suspicious of the motivation of their supervisors, resistant to requirements for such middle-class standards as punctuality, daily work attendance, neatness and direction to long-range goals. Communication problems were severe, with constant misunderstanding among themselves as well as with their supervisors. They experienced "culture shock" as they were asked to fit into a setting so foreign to their past experience, especially when their training stipend still kept them at a low economic level.

The reactions of the wives to the new life-styles and stresses of their husbands made considerable difference in training success,

with many wives being resentful of their husband's heretofore unknown preoccupation with work and study.

Group and individual counseling by clinical psychologists and with their work supervisors was found to be extremely helpful in many ways, including the promotion of mutual understanding and (for the men) help in facing and dealing with reality. (There was a tendency for the trainees, under pressure, to engage in daydreams as to other routes to high-level, well-paying employment).

The authors of this study recommend that further analysis be made of family situations of previously unemployed men in job-training and that counseling services be made available to their families.

The men in this study were not among the most seriously disadvantaged, in that they all had intelligence test scores in the normal range, most were high school graduates, most were married, and all had grown up in a northern, urban city (Detroit).

It is recognized that most job-training projects cannot avail themselves of a counseling staff of trained psychologists. However, consultation to the training and supervisory staffs might well be feasible in many settings. Such consultation is strongly recommended. Among the relevant consultants might well be professionally trained social workers, guidance counselors, psychiatrists, and psychologists.

It is likely that highly skilled job and personal counseling might be more necessary for men than for women because low-income

(especially Negro) males are more apt than low-income females to have experienced severe rejection and failure in their own families, school, and the community.

In communities where personal and family counseling services are available, it would probably be most appropriate to enlist such services for trainees rather than attempt to include such counseling as part of the work supervisor's function. Use of such services should not be considered as a substitute for social and psychological consultation to training staff.

Experiemental approaches are indicated in supervision and training; these may include the use of audio-visual aids, programmed instruction, role-playing and the like. When printed materials are used, they should be brief, clear, and written at an appropriate reading level for the trainee to whom they are given. Assessment should be made of local and State requirements for licensing and certification for the various employment fields, and every effort should be made to help the employee meet these requirements. (See, also, below, "In-Service Education".)

The principles suggested above in highly condensed form clearly indicate the need for a director of on-the-job training in programs of this kind. This director will also need orientation and training, along the lines suggested in these recommendations.

Experience shows that such a director needs to be a flexible, informal person who is open to experimentation, keenly interested in working with non-professionals, and able to withstand pressure and strains. In large agencies which employ a sizeable number of trainees a full-time director of these activities may be needed in each agency. In smaller organizations it might be well to have one director of job placement and training who works with a number of agencies, both with the trainees and the regular professional and supervisory staff. The training and continuing development of such directors might well take place on county, State, or regional levels. Pooling of experience and open discussion should be a major part of such meetings.

In-Service Education

An in-service educational component for neighborhood employees is strongly recommended by some specialists in this field. It is their observation that job placement and job training, combined with job-related education, constitutes the best approach to career development and job satisfaction. This involves working with the schools in the development of the needed courses, such as a core curriculum in the human services. It has been found that in a number of areas community colleges are most open to the development of this kind of curriculum. At any rate, it is necessary to coordinate the educational and job programs and to work closely with the educational institution in order to see that this occurs. It is essential that poor people be paid for the time spent in in-service education as well as for in-service training.

Continuing Upgrading of the Job

Arrangements should be made for continual development of the nature of the job that the employee carries. He should be given increasingly well-paying and complex work as he is able to carry these assignments and indicates an interest in doing so. Wages must be adequate to meet the basic needs of the employee and to conform to the minimum wage laws and the wage scale of the organization. Supplementary assistance is frequently necessary, especially when child care must be provided and when transportation is expensive. There must be opportunity to move up the wage scale with work experience and satisfactory job performance.

Evaluation

Evaluation of these projects is necessary and this evaluation should include evaluation by the employee as well as by his trainers and supervisors. In evaluation one must consider all aspects of the program input and their impact on the trainee, the persons whom he serves, on the program itself, and on the rest of the staff.

More formal evaluation of a sample of projects is highly desirable. This calls for specific evaluation designs and analysis and requires a director of evaluation specifically trained in program research. Program research in this field is almost non-existent.

Although there are a growing number of reports that people with little or no related experience, education, or training have moved successfully into jobs that were previously considered to be professional, there is little firm evi-

dence to support these claims. Evaluation and research is needed, addressed to questions related to the impact and effectiveness of programs that seek to employ neighborhood people and to educate and train them to move up the career ladder.

Use of Volunteers

Emphasis has been given above to the employment of neighborhood people rather than to opportunities for them to serve as volunteers. However, there is a wide range of potential volunteer activities for parents in the human service fields. Opportunities should be made especially available to neighborhood residents in low income areas served by a health, education, or welfare facility. Volunteers should be paid a per diem amount. Consideration should also be given to payment of an honorarium. (See pp.19-20). It is imperative that activities be developed that are suited to the interests and abilities of volunteers as individuals. These opportunities should include varying levels of complexity. The high professionalization of many health, education and welfare activities has tended in the past to exclude volunteers from any but very routine kinds of tasks, but it is important to re-examine and restructure practices of this kind. As in the case of trainees, in-service training and supervision should be made available to volunteers.

Some communities have had success in establishing central volunteer recruitment and assignment centers. This approach has much to recommend it in that it may better systematize the match between volunteer opportunities and persons who wish to volunteer. Care must be taken, however, that such a ser-

vice not cater chiefly to upper-class and middle-class personnel, which has been the tradition in many communities.*

Administration

Programs to provide for employment of parents and young people and for their service as volunteers require specific administrative planning and implementation. This includes:

(1) Functions of administrator to implement these goals.

This staff person might well be an individual who is charged with the responsibility of implementing all parent participation programs in connection with a school, health, or welfare (including rehabilitation) system. (Parent participation programs would include such elements as use of parents at advisory and policy levels, employment of parents, and service programs for parents -- such as parent education and counseling.) On the other hand, parent participation programs might be administratively organized along different lines with directors of different components such as: (a) community organization (including the component of parents as advisors, etc.); (b) employment and volunteers; and (c) service programs for parents. A great deal depends on the size and administrative structure and services already operating in a community as well as on the availability of appropriate staff.

*An extensive up-to-date (July 1968) annotated bibliography on the employment of poor people in health, education, and welfare fields is available (single copies only) from the Division of Intramural Research, Office of Research, Demonstrations and Training, Social and Rehabilitation Service. Poor People at Work by Linda Millman and Catherine Chilman.

(2) Financing of Administrative and Other Costs.

Whatever administrative, employment and training methods are employed, there should be clear evidence that parent participation programs have been developed, with an emphasis on low-income and minority group parents. Federal grant-in-aid funds are available at varying levels (depending on the different programs). These funds may be used to help defray certain administrative costs and related expenses.

(3) Coordination of Parent and Youth Employment Programs.

Programs for parent and youth employment need to be coordinated with other similar programs supported by this Department, OEO, and the Department of Labor. This coordination needs to take place at all levels of government.

SERVICES FOR PARENTS

It is recommended that a major effort be made to stimulate and develop a broad range of services for parents in all programs related to children and youth. The ultimate goals of this effort should be coordination of health, education, and welfare services in their administration and delivery; coordination of these services with other related federally aided programs such as those in the areas of housing, employment and food distribution; participation of parents as advisors in planning of these programs and as employees in them; availability of services at all socio-economic levels, but with a particular emphasis on services for poverty and minority groups; a family-centered approach; programs aimed at effecting changes in the environment in which families live as well as helping families adjust to the environment; flexibility of administration and program content so that the programs may be maximally adapted to the situation, language and culture patterns, and goals of the wide diversity of groups within this country.

Basic Rationale

The importance of the family, the stresses upon it, and the fragmentation of families through forces of society and its many separate services was presented on pages 1-2-3-4.

The traditional patterns of services to parents have tended to be those of parent education and counseling; these services appear not to have made a very large impact. It is apparent that programs for parents and their children need to meet the more pressing survival needs first, or at least simultaneously, with education and counseling. These needs include those of income, employment,

physical health, and education and care of children. The individual operates as a total person: the physical, economic, social, and psychological components of his life are in constant interaction with each other, but services to individuals are partialized, even though any one service rendered must include consideration of the whole person if it is to be effective. Families are composed of individuals who also make up an interacting unit: what affects one, affects all. As schools, clinics, hospitals, and welfare agencies have become increasingly aware of these principles, each has attempted to act on them. Duplication of effort by administrators, staff personnel, and service recipients has been one of the outcomes of this attempt. Another outcome has been that these various services sometimes work at cross purposes with each other. Gaps in needed services also frequently occur.

Moreover, there is a tendency for health, education, and welfare programs to proceed on the principle that individuals and families need services and skills so that they may adjust to the environment. However, relatively little attention is given to the defects in the environment, itself. As the complexity and size of environmental problems have multiplied (such as those of the urban ghetto or of rural decay associated with technological revolutions in agriculture and mining), the pressure of adverse environmental factors has increased. The size and complexity of these factors have contributed to a sense of powerlessness and apathy of many of our citizens, with the greatest pressure being on the poor. Educational, medical, and counseling services are not sufficiently powerful tools to alleviate, by themselves, these stresses or

their impact: services must also include components aimed at environmental change. Thus, health, education, and welfare programs need mechanisms for the advocacy function, hearing and acting upon grievances, legal aid to assure that the disadvantaged as well as the advantaged obtain their legal rights, as well as elements of citizen participation as employees and policy makers.

To develop the maximum coordination of services, administrators of health, education, and welfare agencies, at all government levels, need to plan together as to how maximum coordination can be achieved. The goal is close coordination of such programs as comprehensive health services, community mental health, maternal and child health, community school programs, parent and child centers, day-care centers, rehabilitation and social services, and public assistance and social security programs.

In these planning deliberations, consideration should be given to the possible legislative blocks and budgetary deficiencies that may stand in the way of implementing such coordination and the resolution of these problems.

Consideration should also be given as to how programs of public agencies might be more closely meshed with those of privately supported services.

Furthermore, consideration should be given as to how data banks of service programs at local, State, and federal levels might be established so that information will be readily available at all levels of government regarding existing and projected services. In effect, a "service retrieval information program" is needed to promote greater efficiency of program planning and administration.

In these deliberations, planning with the agencies of other relevant Departments should be carried out. These include the Office of Economic Opportunity, the Department of Labor, the Department of Agriculture, and the Department of Housing and Urban Development.

To Improve Service Delivery and Integrated Administration the following program components should be developed insofar as this is possible.

(1) Neighborhood service centers should be developed that include a range of health services, (including family planning), social services, application for public assistance and social security, child care facilities, mental health services, family life and sex education, and rehabilitation services. Referrals combined with follow-up would be made to employment services and to specialized services that cannot readily be offered in a neighborhood center. Such a neighborhood center does not necessarily need to include all these services in one physical facility. However, insofar as possible, it is desirable that these services be housed in close proximity to each other in order to maximize convenience for service applicants and recipients and to promote communication between staff members. It is not necessarily desirable that staff people for these various services be present in each center full-time everday. Especially in centers that serve small neighborhoods or communities, a staff specialist (such as a public health nurse, a school guidance counselor, a public assistance worker) might cover several centers, being available in each one on specified days of the week. It is essential to arrange working hours so that centers are open for ser-

vice at least several night a week. Staggered working hours can be arranged for staff so that overtime work is not generally needed.

It is further recommended that such centers, which offer a "cafeteria of general services," be planfully linked to facilities which offer highly specialized services, such (for example) hospital-based services, intensive psychotherapy, adoption services, speech and hearing therapy -- to name but a few of the possibilities. Highly specialized and relatively rare services (such as neuro-surgery, to name but one example), might be made available on a regional level, but linked, in planning and operation, to more general medical programs and to a range of related services (such as health, financial aid, homemaker and counseling) in the neighborhood center complex nearest to where the patient lives.

This kind of broader planning for improved standards and delivery of inter-related specialized and general services will need to be carried out, in many instances, by staff at State and regional levels and will require coordinated planning by health, welfare, and education personnel working together and including private, as well as public agencies.

(2) To the maximum possible extent, efforts should be made to develop central intake procedures, central recording systems, and coordinated evaluation and diagnosis of individual and family problems. A great deal of time is wasted for both staff and recipients when each service maintains its own intake and recording systems.

Diverse evaluations and diagnoses are made regarding individuals and families and these tend not to be coordinated into a workable and acceptable system. Efforts should be made to involve school personnel in such evaluation, diagnosis, and recommendations. It is strongly recommended that staff people from the various services (health, welfare, education, employment, social security, etc.) meet together often for joint planning of service content and delivery and for evaluation of program effectiveness. In these meetings, sub-professional aides and members of the advisory boards (including neighborhood personnel) should be included.

(3) Outreach methods are highly desirable and these can often be performed very well by aides from the neighborhood who are trained and supervised by professional personnel.

(4) Improvement is called for in reference to delivery of services to rural areas. Mobile services, manned by both medical and welfare staff members may constitute a useful approach. Every effort should be made to coordinate the delivery of mobile services to avoid duplication and fragmentation. Particularly in rural areas, it is recommended that service programs be coordinated, as relevant, with the activities of the Department of Agriculture in reference to both the food programs and the extension services.

(5) As necessary, costs of transportation should be provided for low-income people who are referred to needed services that are not within easy walking distance of either their homes or a multi-service or other such center. The same principle applies to costs of child care.

(6) Insofar as practicable multi-service centers should be set up very close to or actually within public schools. Many school buildings are not used after school hours or during the summer and better use of these building is indicated. Moreover, it would be desirable to form as close a link as possible between school and the family and to render services closely coordinated with the school to all family members. Such a procedure should help in creating positive attitudes on the part of parents towards the educational system and would strengthen the educational programs for children since many of their learning problems are related to family difficulties.

To improve the range and kinds of services offered the following approaches are recommended:

(1) Certain basic principles should underlie all services; these include: provision of Spanish-speaking staff members and needed materials written in Spanish in those areas in which there is a significant proportion of Spanish-speaking peoples; special efforts to involve males as well as females in all programs; emphasis on speedy, courteous service; care that all programs be cognizant of the variety of cultural values and life situations of people whom the programs seek to serve; services available at times and places convenient to target groups.

(2) There is no one service or service strategy that will meet the needs of all disadvantaged individuals and families. A cafeteria of services is needed along with a wide range of service methodologies. Disadvan-

taged people, like others, present a wide diversity of problems and needs; they are ready, willing, and able to use different kinds of services and this is related to what they are like as individual human beings and their different cultural patterns, personality characteristics, levels of information, life experiences, and current situation. Thus, many services should be made available and information be given about them. Individuals and families should have freedom to choose what seems to be most useful to them. Choices should be based upon information about, and participative experience with, a variety of services. (Of course, there are limits to freedom of choice in certain matters which are subject to legal enforcement, such as school attendance, certain immunizations, extra-legal deviant behavior, etc.). (3) It is highly desirable that there be further stimulation of family life and sex education, combined with counseling and offered at all age levels from pre-school through the grandparent stage. It is likely that special emphasis should be put on programs of this kind for pre-adolescents and their parents. Ideally, such a program might be particularly offered in a multi-service center and combined with activities of the schools. As appropriate, family planning education and counseling would be a part of this program. This education and counseling should be coordinated with medical services so that referrals for contraceptive help could be readily made.

A program of family life and sex education should be developed as part of an overall, coordinated community plan; in many parts of the

country privately financed agencies are engaged in projects of this sort and universities often have personnel particularly trained in this field. This is especially likely to be true in reference to family living and child development departments of Colleges of Home Economics. Purchase of services is possible under various legislative authorities of this Department. These programs should also be coordinated with those that may be developed through adult education or which may exist through the extension service of the Department of Agriculture.

In the case of family life and sex education, including family planning education and services, it is particularly important to be sensitively aware of the cultural patterns of the groups and individuals being served. These patterns relate to socio-economic status, ethnic and religious backgrounds, rural or urban settings, etc. Individuals vary in their adoption of cultural patterns of their own, and other groups, and this should be taken into account. Staff personnel working in these programs should avoid the tendency to make "moral judgments" or to impose their own value systems on others. Family planning must be seen as a service that can help parents (fathers and mothers alike) achieve their own goals of better lives for themselves and their children; not as a goal of program personnel to limit population growth.

(4) It is recommended that a family materials information center be developed either in a multi-service agency or in other agencies that receive federal funding from this Department and are directed toward services for children and youth and their parents. Such a center might well

include relevant publications from this Department and other sources, film guides or film showings, along with information about community resources of interest to families including educational, recreational, medical, mental health, housing, legal, and social services.

Guides to films and publications in the field of family life and parent education are available from various sources, including the Children's Bureau, both the Reports Division and the Office of the Chief. There is a dearth of publications and films that are particularly adapted to the life situation and reading level of disadvantaged parents. Localities might well work to develop materials that particularly apply to their local situation.

(5) It is further recommended that steps be taken to set up a family pre-crisis and crisis service, preferably within a family multi-service center complex. Such a center might well include emergency child care services, home nursing services, home maker services, emergency first aid, an emergency financial aid fund, short-term and immediate psychiatric services, and emergency housing programs. Such a center would also have close contact with other emergency agencies in the community, such as hospitals and the police and fire departments. Other crisis centers are being set up in some communities, such as suicide prevention services, emergency mental health clinics, and the like. Explorations should be made as to whether these services might not well be incorporated within a family pre-crisis and crisis center, or, at least, closely linked to it.

Many families are weakened by small emergencies that they cannot meet without help. Over time, a series of crises may seriously undermine the foundations of family stability. Highly disadvantaged families are particularly apt to encounter a series of crises. A source of immediate aid in times of family trouble might well greatly strengthen family life and prevent final breakdown. Concrete, specific services to seriously disturbed (and, often, disadvantaged families) may be effective in reducing their disorganization and sense of powerlessness. However, some families of this kind need continuing, particularly skill help (perhaps family therapy) to handle a tendency to move chronically from crisis to crisis.

Legal aid should be available to families who cannot otherwise afford it. This might be purchased under legislative authority already available; explorations should be made in this direction.

(6) Consumer information and counseling is particularly needed for low-income families. A great deal of this is already available through various government agencies. It should be brought together in one place, such as in multi-service agency or family information centers. Much of this information is presented on too high a reading level and in terms that are not relevant to the situation of poor people. This material should be assessed and steps taken to simplify it and to adapt it to the situation of poor people. Included in materials for consumer information and counseling should be clear, concise, written information

readily available as to public programs and services financed by this Department to which individuals and families are entitled.

(7) Experimental, pilot projects are recommended under the various research and demonstration project funding authorities of the Department.

Experimental action projects that should be stimulated and developed include the following:

a. The provision of mental health consultant programs to schools, which include mental health services to both parents and children, and which are aimed primarily at early prevention of behavior disorders. Mental health consultation should also be available to school personnel to enhance effective approaches to children and their parents. Included in this consultation might be training of teachers for interviewing parents more effectively and for making visits to the families of children.

b. A family counseling service located in the school and linked to other community resources and other pupil personnel services. This family counselor would have the responsibility of offering an interview to all parents of children in the school at least once a year in order to gain understanding of parental goals and concerns and to offer further family services. Particular emphasis would be placed on reaching parents whose children are at the kindergarten and first grade levels. Family counselors might well be especially selected people (both men and women) who do not have full professional training,

but who are provided in-service supervision and training by psychiatric, social work, psychological, and teaching personnel.

c. Parent cooperatives of many sorts might be experimentally developed and financed, especially in low-income areas. This might include parent cooperatives to purchase their own health, legal, educational or counseling services.

d. Selection, training, education, supervision, and employment of neighborhood youth and parents has been recommended in this publication. It has also been stated that very little systematic, research-based knowledge is available in this field. Therefore, a wide range of experimental projects is needed, with built-in program research, in order to learn more about what program ingredients are most effective under varying circumstances with varying target groups and staff.

e. The same comment as in (d) above applies to use of volunteers and to parents in advisory and policy-making capacities.

f. Films, publications, posters, radio and television programs addressed to low-income families are needed to provide information both about Department programs and about such matters as child-rearing, health care, consumer practices, family relations, and so on. Such materials need to be tested as to their use, their relevance, and their impact. Experimental projects along these lines are desirable.

g. Organization, administration and delivery of services at the community level has not been adequately studied and tested. Particularly needed are program research projects related to neighborhood multiservice centers and delivery of services to rural areas.

h. A current trend, especially in the research field, is the training of disadvantaged parents (especially mothers) to be "tutors" of their own pre-school children or infants. A variety of strategies is being tried, including the training of selected neighborhood personnel to be "parent educators" who visit homes to train parents (primarily mothers). The basic goal of these projects is to provide an enriched home environment for very young children to promote their maximum early development with the cooperation of and participation of their parents (with the emphasis, again, on their mothers). The chief impact criteria that are being used are tests of changes in the child's (and in some cases, the mother's) intellectual development. Further experiments, with a research component, along these lines are recommended, especially with a broadened concern for the physical and emotional well-being of the child and his whole family, including his father.

<u>To Assess Effectiveness of These Services</u>

(1) Program research should be applied to a sample of the different kinds of services that are developed for parents. Consideration should be given to testing alternate modes of service delivery and various

kinds of service programs. In assessing the impact and effectiveness of these services consideration should be given to their impact on all members of the family. Experimental service programs are recommended as pilot projects so that a wide variety of service approaches may be tested.

(2) Along with program research, basic research must continue in relation to families as well as in relation to children and youth.

DEVELOPMENT OF TRAINED PERSONNEL FOR SUPERVISION AND ADMINISTRATION

A number of the recommendations that have been made require new directions in program planning and implementation. To a large extent, information as to staff procedures has not yet found its way into the curricula of undergraduate and graduate schools nor has it found its way, to an appreciable degree, into professional literature. A good deal of the content is in the experience and observations of staff people in public and private agencies in the fields of health, education, and welfare in various parts of the country. This is especially likely to be true in reference to programs that have been funded by OEO. Therefore, it is likely that it will be necessary to hold consultations with relevant staff people from these experimental programs in order to derive guidelines for a number of the procedures and programs contained in these recommendations. The following kinds of staff personnel will be needed in the administration of parent participation programs:

(1) Staff to work with parent advisory committees.

(2) Staff to direct volunteer and on-the-job training and educational programs for neighborhood personnel.

(3) Staff to organize and administer multi-service neighborhood centers.

Staff people who work in positions (1) and (2) above are likely to need the following kinds of personal characteristics: interest and commitment to working in partnership with disadvantaged people, willingness to experiment, personal maturity, ability to withstand stress, objectivity (over-identification with poor people has been found to be a potential handicap), flexibility,

capacity for clear and direct communication (listening as well as speaking), sensitivity to other people, ability to find the strengths of people and build on them.

Although some hold that previously disadvantaged people work best with other disadvantaged people, this has been found not to be necessarily the case. The same point holds in reference to race and sex. It is not necessarily true that Negroes work best with Negroes, women with women, or men with men. The most critical factors reside in the personality of the staff person plus experience and capacity and willingness to learn new ways of working.

In the case of organizers and directors of multi-service neighborhood centers, it is clear that organizing and administrative ability is important. Beyond this, it is crucial that such a person have a broad, inter-disciplinary point-of-view which involves equal respect for, and acceptance of, the wide range of human service professions and agencies. Flexibility, willingness to experiment, knowledge of the community and State and federal resources in health, welfare, and education are also important.

Staff training should be carried out on a continuing basis through consultations, workshops directed toward pooling of experiences and observations, attendance at intensive training courses at universities, and reference to relevant publications.

Other suggestions for training will be found on pages 19-20-21-22, 31-32-33.

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